

**Application for a premises licence to be granted
under the Licensing Act 2003**

PLEASE READ THE FOLLOWING INSTRUCTIONS FIRST

Before completing this form please read the guidance notes at the end of the form. If you are completing this form by hand please write legibly in block capitals. In all cases ensure that your answers are inside the boxes and written in black ink. Use additional sheets if necessary.

You may wish to keep a copy of the completed form for your records.

I/We VICI LEISURE GROUP LTD

(Insert name(s) of applicant)

apply for a premises licence under section 17 of the Licensing Act 2003 for the premises described in Part 1 below (the premises) and I/we are making this application to you as the relevant licensing authority in accordance with section 12 of the Licensing Act 2003

Part 1 – Premises details

Postal address of premises or, if none, ordnance survey map reference or description 23 Church Street			
Post town	Ormskirk	Postcode	L39 3AG
Telephone number at premises (if any)			
Non-domestic rateable value of premises		£14,250	

Part 2 - Applicant details

Please state whether you are applying for a premises licence as Please tick as appropriate

- | | | |
|---|-------------------------------------|-----------------------------|
| a) an individual or individuals * | <input type="checkbox"/> | please complete section (A) |
| b) a person other than an individual * | | |
| i as a limited company/limited liability partnership | <input checked="" type="checkbox"/> | please complete section (B) |
| ii as a partnership (other than limited liability) | <input type="checkbox"/> | please complete section (B) |
| iii as an unincorporated association or | <input type="checkbox"/> | please complete section (B) |
| iv other (for example a statutory corporation) | <input type="checkbox"/> | please complete section (B) |
| c) a recognised club | <input type="checkbox"/> | please complete section (B) |

- d) a charity ☐ please complete section (B)
- e) the proprietor of an educational establishment ☐ please complete section (B)
- f) a health service body ☐ please complete section (B)
- g) a person who is registered under Part 2 of the Care Standards Act 2000 (c14) in respect of an independent hospital in Wales ☐ please complete section (B)
- ga) a person who is registered under Chapter 2 of Part 1 of the Health and Social Care Act 2008 (within the meaning of that Part) in an independent hospital in England ☐ please complete section (B)
- h) the chief officer of police of a police force in England and Wales ☐ please complete section (B)

* If you are applying as a person described in (a) or (b) please confirm (by ticking yes to one box below):

I am carrying on or proposing to carry on a business which involves the use of the premises for licensable activities; or ☐

I am making the application pursuant to a ☐

statutory function or ☐

a function discharged by virtue of Her Majesty's prerogative ☐

(A) INDIVIDUAL APPLICANTS (fill in as applicable)

Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev)	
Surname			First names		
Date of birth over			I am 18 years old or <input type="checkbox"/> Please tick yes		
Nationality					
Current residential address if different from premises address					
Post town				Postcode	
Daytime contact telephone number					
E-mail address (optional)					

SECOND INDIVIDUAL APPLICANT (if applicable)

Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev)	
Surname			First names		
Date of birth over			I am 18 years old or <input type="checkbox"/> Please tick yes		
Nationality					
Current residential address if different from premises address					
Post town				Postcode	
Daytime contact telephone number					
E-mail address (optional)					

(B) OTHER APPLICANTS

Please provide name and registered address of applicant in full. Where appropriate please give any registered number. In the case of a partnership or other joint venture (other than a body corporate), please give the name and address of each party concerned.

Name VICI LEISURE GROUP LTD
Address SATIS OLD HALL FARM ST MICHAEL ROAD ORMSKIRK LANCASHIRE ENGLAND L39 6SA
Registered number (where applicable) 11016561
Description of applicant (for example, partnership, company, unincorporated association etc.) Company
Telephone number (if any)

E-mail address (optional)

Part 3 Operating Schedule

When do you want the premises licence to start?

DD		MM		YYYY			
2	0	1	1	2	0	1	7

If you wish the licence to be valid only for a limited period, when do you want it to end?

DD		MM		YYYY			

Please give a general description of the premises (please read guidance note 1)

The premises are positioned on Ormskirk high street, currently in between an appliance shop and butchers.

The premises will be a restaurant/bar serving food with approximately 40-60 seats over 2 floors.

The 1st being ground floor and 2nd being a small private dining area in the basement.

There will also be a bar area for customers waiting for seat and to enjoy a drink.

There are sufficient toilets for women, men and a disabled toilet (Disabled shared with men for sit down facilities) for the capacity.

There is also a shared toilet for the private dining area in the basement.

If 5,000 or more people are expected to attend the premises at any one time, please state the number expected to attend.

What licensable activities do you intend to carry on from the premises?

(please see sections 1 and 14 and Schedules 1 and 2 to the Licensing Act 2003)

Provision of regulated entertainment (please read guidance note 2)

Please tick all that apply

- | | |
|---|-------------------------------------|
| a) plays (if ticking yes, fill in box A) | <input type="checkbox"/> |
| b) films (if ticking yes, fill in box B) | <input type="checkbox"/> |
| c) indoor sporting events (if ticking yes, fill in box C) | <input type="checkbox"/> |
| d) boxing or wrestling entertainment (if ticking yes, fill in box D) | <input type="checkbox"/> |
| e) live music (if ticking yes, fill in box E) | <input type="checkbox"/> |
| f) recorded music (if ticking yes, fill in box F) | <input checked="" type="checkbox"/> |
| g) performances of dance (if ticking yes, fill in box G) | <input type="checkbox"/> |
| h) anything of a similar description to that falling within (e), (f) or (g) (if ticking yes, fill in box H) | <input type="checkbox"/> |

Provision of late night refreshment (if ticking yes, fill in box I)



Supply of alcohol (if ticking yes, fill in box J)



In all cases complete boxes K, L and M

A

Plays Standard days and timings (please read guidance note 7)			<u>Will the performance of a play take place indoors or outdoors or both – please tick</u> (please read guidance note 3)		Indoors	<input type="checkbox"/>
					Outdoors	<input type="checkbox"/>
					Both	<input type="checkbox"/>
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 4)			
Mon						
Tue			<u>State any seasonal variations for performing plays</u> (please read guidance note 5)			
Wed			<u>Non standard timings. Where you intend to use the premises for the performance of plays at different times to those listed in the column on the left, please list</u> (please read guidance note 6)			
Thur						
Fri						
Sat						
Sun						

B

Films Standard days and timings (please read guidance note 7)			Will the exhibition of films take place indoors or outdoors or both – please tick (please read guidance note 3)		Indoors	<input type="checkbox"/>
					Outdoors	<input type="checkbox"/>
Day	Start	Finish			Both	<input type="checkbox"/>
Mon			Please give further details here (please read guidance note 4)			
Tue						
Wed			State any seasonal variations for the exhibition of films (please read guidance note 5)			
Thur						
Fri			Non standard timings. Where you intend to use the premises for the exhibition of films at different times to those listed in the column on the left, please list (please read guidance note 6)			
Sat						
Sun						

C

Indoor sporting events Standard days and timings (please read guidance note 7)			<u>Please give further details</u> (please read guidance note 4)
Day	Start	Finish	
Mon			
Tue			<u>State any seasonal variations for indoor sporting events</u> (please read guidance note 5)
Wed			
Thur			
Fri			<u>Non standard timings. Where you intend to use the premises for indoor sporting events at different times to those listed in the column on the left, please list</u> (please read guidance note 6)
Sat			
Sun			

D

Boxing or wrestling entertainments Standard days and timings (please read guidance note 7)			<u>Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick</u> (please read guidance note 3)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 4)		
Mon					
Tue					
Wed			<u>State any seasonal variations for boxing or wrestling entertainment</u> (please read guidance note 5)		
Thur					
Fri					
Sat			<u>Non standard timings. Where you intend to use the premises for boxing or wrestling entertainment at different times to those listed in the column on the left, please list</u> (please read guidance note 6)		
Sun					

E

Live music Standard days and timings (please read guidance note 7)			<u>Will the performance of live music take place indoors or outdoors or both – please tick</u> (please read guidance note 3)		Indoors	<input type="checkbox"/>
					Outdoors	<input type="checkbox"/>
					Both	<input type="checkbox"/>
Day	Start	Finish				
Mon			<u>Please give further details here</u> (please read guidance note 4)			
Tue						
Wed			<u>State any seasonal variations for the performance of live music</u> (please read guidance note 5)			
Thur						
Fri			<u>Non standard timings. Where you intend to use the premises for the performance of live music at different times to those listed in the column on the left, please list</u> (please read guidance note 6)			
Sat						
Sun						

F

Recorded music Standard days and timings (please read guidance note 7)			Will the playing of recorded music take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors	<input checked="" type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish			
Mon	11:00	02:00	Please give further details here (please read guidance note 4) We wish background music to be played for customers.		
Tue	11:00	02:00			
Wed	11:00	02:00	State any seasonal variations for the playing of recorded music (please read guidance note 5)		
Thur	11:00	02:00			
Fri	11:00	02:00	Non standard timings. Where you intend to use the premises for the playing of recorded music at different times to those listed in the column on the left, please list (please read guidance note 6)		
Sat	11:00	02:00			
Sun	11:00	02:00			

G

Performances of dance Standard days and timings (please read guidance note 7)			<u>Will the performance of dance take place indoors or outdoors or both – please tick</u> (please read guidance note 3)		Indoors	<input type="checkbox"/>
					Outdoors	<input type="checkbox"/>
Day	Start	Finish			Both	<input type="checkbox"/>
Mon			<u>Please give further details here</u> (please read guidance note 4)			
Tue						
Wed			<u>State any seasonal variations for the performance of dance</u> (please read guidance note 5)			
Thur						
Fri			<u>Non standard timings. Where you intend to use the premises for the performance of dance at different times to those listed in the column on the left, please list</u> (please read guidance note 6)			
Sat						
Sun						

H

Anything of a similar description to that falling within (e), (f) or (g) Standard days and timings (please read guidance note 7)			Please give a description of the type of entertainment you will be providing		
Day	Start	Finish	<u>Will this entertainment take place indoors or outdoors or both – please tick</u> (please read guidance note 3)	Indoors	<input type="checkbox"/>
Mon				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Tue			<u>Please give further details here</u> (please read guidance note 4)		
Wed					
Thur			<u>State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g)</u> (please read guidance note 5)		
Fri					
Sat			<u>Non standard timings. Where you intend to use the premises for the entertainment of a similar description to that falling within (e), (f) or (g) at different times to those listed in the column on the left, please list</u> (please read guidance note 6)		
Sun					

I

Late night refreshment Standard days and timings (please read guidance note 7)			Will the provision of late night refreshment take place indoors or outdoors or both – please tick (please read guidance note 3)	
			Indoors	<input type="checkbox"/>
			Outdoors	<input type="checkbox"/>
			Both	<input checked="" type="checkbox"/>
Day	Start	Finish	Please give further details here (please read guidance note 4) We would like to have a few seats outside the front of premises like other places in Ormskirk.	
Mon	11:00	02:00		
Tue	11:00	02:00		
Wed	11:00	02:00		
Thur	11:00	02:00	State any seasonal variations for the provision of late night refreshment (please read guidance note 5)	
Fri	11:00	02:00		
Sat	11:00	02:00	Non standard timings. Where you intend to use the premises for the provision of late night refreshment at different times, to those listed in the column on the left, please list (please read guidance note 6)	
Sun	11:00	02:00		

J

Supply of alcohol Standard days and timings (please read guidance note 7)			Will the supply of alcohol be for consumption – please tick (please read guidance note 8)	On the premises	<input checked="" type="checkbox"/>
				Off the premises	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	State any seasonal variations for the supply of alcohol (please read guidance note 5)		
Mon	11:00	02:00			
Tue	11:00	02:00			
Wed	11:00	02:00			
Thur	11:00	02:00			
			Non standard timings. Where you intend to use the premises for the supply of alcohol at different times to those listed in the column on the left, please list (please read guidance note 6)		
Fri	11:00	02:00			
Sat	11:00	02:00			
Sun	11:00	02:00			

State the name and details of the individual whom you wish to specify on the licence as designated premises supervisor (Please see declaration about the entitlement to work in the checklist at the end of the form):

Name Stuart Anthony MacFarlane	
Date of birth 15/05/1987	
Address Satis Old Hall Farm, St Michael Road Aughton Lancashire	
Postcode	L39 6sa
Personal licence number (if known) PERS/567	
Issuing licensing authority (if known) West Lancashire District Council	

☐ ☐ ☐ ☐

K

Please highlight any adult entertainment or services, activities, other entertainment or matters ancillary to the use of the premises that may give rise to concern in respect of children (please read guidance note 9).

The consumption of alcohol

L

Hours premises are open to the public Standard days and timings (please read guidance note 7)			<u>State any seasonal variations</u> (please read guidance note 5)
Day	Start	Finish	<u>Non standard timings. Where you intend the premises to be open to the public at different times from those listed in the column on the left, please list</u> (please read guidance note 6)
Mon	11:00	02:00	
Tue	11:00	02:00	
Wed	11:00	02:00	
Thur	11:00	02:00	
Fri	11:00	02:00	
Sat	11:00	02:00	
Sun	11:00	02:00	

M Describe the steps you intend to take to promote the four licensing objectives:

a) General – all four licensing objectives (b, c, d and e) (please read guidance note 10)

TO PROMOTE ALL FOUR LICENSING OBJECTIVES WE WILL KEEP:
Strong management controls and effective training of all staff so that they are aware of the premises license and the requirements to meet the four licensing objectives with particular attention to: a/ no selling of alcohol to underage people b/ no drunk and disorderly behavior on the premises area c/ vigilance in preventing the use and sale of illegal drugs at the retail area d/ no violent and anti-social behaviour e/ no any harm to children - Operating Schedule providing the hours of operation and licensable activities during those hours. - Designated premises supervisor confirmed it is obligated to be in day-to-day control of the premises, to provide good training for staff on the Licensing Act (Training Record), to make or authorize each sale - Clear "Challenge 25" information to prevent the supply of alcohol to under-age drinkers. – High Definition CCTV system installed with recording option available - Roller metal exterior window shutter will be fixed to ensure that shop front is safe and secure at all times. As a licensed premises we know that it is necessary to carry out our functions or operate their businesses with a purpose of promoting these objectives. We promise to support these objectives through their operating schedules and other measures (including staff training and qualifications, policies, and strategic partnerships with other agencies).

b) The prevention of crime and disorder

CCTV System installed to monitor entrances, exits, and other parts of the premises in order to address the prevention of crime objective. A clear and legible notice outside the premises indicating the normal hours under the terms of the premises licence during which licensable activities are permitted. Clear and conspicuous notices warning of potential criminal activity, such as theft, that may target customers will be displayed. Not selling of alcohol to drunk or intoxicated customers. Prevention and vigilance in illegal drug use at the premises area. Staff will be well trained in asking customers to use premises in an orderly and respectful manner and prevent drinking alcohol where they should not. Professional well trained Security staff will be employed to monitor customers internally and externally when needed.

c) Public safety

Internal and external lighting fixed to promote the public safety objective. Well trained staff adherence to environmental health requirements. Training and implementation of underage ID checks. A log book or recording system shall be kept upon the premises in which shall be entered particulars of inspections made; those required to be made by statute, and information compiled to comply with any public safety condition attached to the premises licence that requires the recording of such information. The log book shall be kept available for inspection when required by persons authorised by the Licensing Act 2003 or associated legislation. All parts of the premises and all fittings and apparatus therein, door fastenings and notices, lighting, heating, electrical, air condition, sanitary accommodation and

other installations, will be maintained at all times in good order and in a safe condition.

d) The prevention of public nuisance

Noise reduction measures to address the public nuisance objective. Prominent, clear and legible notices will be displayed at the exit requesting the public to respect the needs of nearby residents and to leave the premises and the area quietly. Staff will be trained to reinforce this and ask customers to leave quietly. Deliveries of goods necessary for the operation of the business will be carried out at such a time or in such a manner as to prevent nuisance and disturbance to nearby residents. The Licensee will ensure that staff who arrive early morning or depart late at night (ex. for unpacking, pricing newly delivered goods) when the business has ceased trading conduct themselves in such a manner to avoid causing disturbance to nearby residents. Customers will be asked not to stand around loudly talking in the street outside the premises. Customers will not be admitted to premises above opening hours. The movement of bins and rubbish outside the premises will be kept to a minimum after 11.00pm. This will help to reduce the levels of noise produced by the premises. Any lighting on or outside the premises will be positioned and screened in such a way so as to not cause a disturbance to nearby residents. Adequate waste receptacles for use by customers will be provided in the local vicinity.

We will also attempt to reduce noise from extraction and ventilation such as air conditioning units. This will be positioned at the rear of the premises away from any other shops or residents. They will also be turned off outside of opening hours.

We will exceed all building regulations with regards to containing noise for example extra glazing and sound protection in ceiling and walls.

Odors and smells, although any smells will be pleasant the ventilation will be to the rear of the property, away from any shops and residents. New ventilations systems with improved filters and reduced decibel levels will mean they are unnoticeable.

e) The protection of children from harm

"Challenge 25" sign which is a retailing strategy that encourages anyone who is over 18 but looks under 25 to carry acceptable ID (a card bearing the PASS hologram, a photographic driving license or a passport) if they wish to buy alcohol. Well trained staff about requirement for persons' identification, age establishment etc. All the details provided in Training Record Book available the retail unit. Log Book will be kept upon the premises all the time. Nothing belong existing Health & Safety requirements

Checklist:

Please tick to indicate agreement

- I have made or enclosed payment of the fee. ☒
- I have enclosed the plan of the premises. ☒
- I have sent copies of this application and the plan to responsible authorities and others where applicable. ☒
- I have enclosed the consent form completed by the individual I wish to be designated premises supervisor, if applicable. ☒
- I understand that I must now advertise my application. ☒
- I understand that if I do not comply with the above requirements my application will be rejected. ☒
- ☐ [Applicable to all individual applicants, including those in a partnership which is not a limited liability partnership, but not companies or limited liability partnerships] I have included documents demonstrating my entitlement to work in the United Kingdom (please read note 15). ☒


IT IS AN OFFENCE, UNDER SECTION 158 OF THE LICENSING ACT 2003, TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION. THOSE WHO MAKE A FALSE STATEMENT MAY BE LIABLE ON SUMMARY CONVICTION TO A FINE OF ANY AMOUNT.

IT IS AN OFFENCE UNDER SECTION 24B OF THE IMMIGRATION ACT 1971 FOR A PERSON TO WORK WHEN THEY KNOW, OR HAVE REASONABLE CAUSE TO BELIEVE, THAT THEY ARE DISQUALIFIED FROM DOING SO BY REASON OF THEIR IMMIGRATION STATUS. THOSE WHO EMPLOY AN ADULT WITHOUT LEAVE OR WHO IS SUBJECT TO CONDITIONS AS TO EMPLOYMENT WILL BE LIABLE TO A CIVIL PENALTY UNDER SECTION 15 OF THE IMMIGRATION, ASYLUM AND NATIONALITY ACT 2006 AND PURSUANT TO SECTION 21 OF THE SAME ACT, WILL BE COMMITTING AN OFFENCE WHERE THEY DO SO IN THE KNOWLEDGE, OR WITH REASONABLE CAUSE TO BELIEVE, THAT THE EMPLOYEE IS DISQUALIFIED.

Part 4 – Signatures (please read guidance note 11)

Signature of applicant or applicant's solicitor or other duly authorised agent (see guidance note 12). **If signing on behalf of the applicant, please state in what capacity.**

Declaration	<ul style="list-style-type: none"> • [Applicable to individual applicants only, including those in a partnership which is not a limited liability partnership] I understand I am not entitled to be issued with a licence if I do not have the entitlement to live and work in the UK (or if I am subject to a condition preventing me from doing work relating to the carrying on of a licensable activity) and that my licence will become invalid if I cease to be entitled to live and work in the UK (please read guidance note 15). • The DPS named in this application form is entitled to work in the UK (and is not subject to conditions preventing him or her from doing work relating to a licensable activity) and I have seen a copy of his or
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	her proof of entitlement to work, if appropriate (please see note 15)
Signature	
Date	20/10/17
Capacity	DIRECTOR

For joint applications, signature of 2nd applicant or 2nd applicant's solicitor or other authorised agent (please read guidance note 13). If signing on behalf of the applicant, please state in what capacity.

Signature	
Date	
Capacity	

Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 14) Same as company			
Post town		Postcode	
Telephone number (if any)	07894118767		
If you would prefer us to correspond with you by e-mail, your e-mail address (optional) stuart@sakushi.co.uk			

Consent of individual to being specified as premises supervisor

Stuart MacFarlane

I

[full name of prospective premises supervisor]

of

Satis Old hall Farm
St Michael Road
Aughton
L396SA

[home address of prospective premises supervisor]

hereby confirm that I give my consent to be specified as the designated premises supervisor in relation to the application for

Licensed Restaurant/Bar

[type of application]

by

Vici Leisure Properties Ltd

[name of applicant]

relating to a premises licence

[number of existing licence, if any]

for

23 Church Street, Ormskirk, L39 3AG

[name and address of premises to which the application relates]

and any premises licence to be granted or varied in respect of this application made by

Vici Leisure Group Ltd

[name of applicant]

concerning the supply of alcohol at

23 Church Street, Ormskirk, L39 3AG

[name and address of premises to which application relates]

I also confirm that I am applying for, intend to apply for or currently hold a personal licence, details of which I set out below.

Personal licence number

PERS/567

[insert personal licence number, if any]

Personal licence issuing authority

West Lancashire District Council

[insert name and address and telephone number of personal licence issuing authority, if any]

Signed



Name (please print)

STUART MACFARLANE

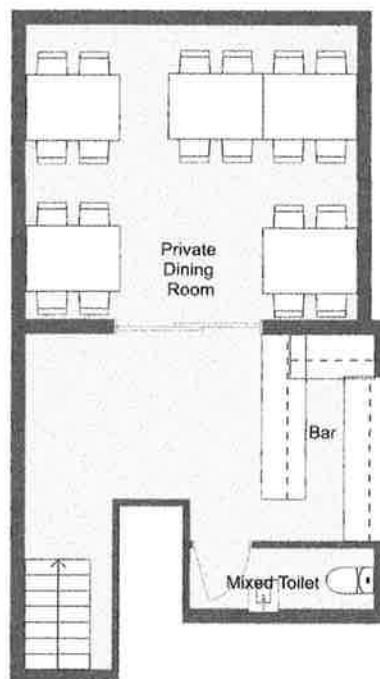
Date

20/10/17

23 Church Street (1:100)

Basement Private Dining

Basement Level



23 Church Street (1:100)

Ground Floor Restaurant

Fire Regulations and building regulation to building control specification

